

8/7-104

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PERISTALTIC ROTATION PUMP WITH EXACT, ESPECIALLY MECHANICALLY LINEAR DOSAGE

the specification of which is attached hereto unless the following box is checked:

☒ was filed on 18 February 2003 as United States Application Number of PCT International Application Number PCT/CZ03/00012 and was amended on 12 Aug. 2003 (if applicable.)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority under Title 35, United States Code, § 119 (a)-(d) or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

<u>PV 2002-683</u>	<u>CZ-Czech Rep.</u>	<u>25 Feb. 2002</u>	Priority Not Claimed
(Number)	(Country)	(Day/Month/Year)	

<u>PV 2002-2926</u>	<u>CZ-Czech Rep.</u>	<u>29 Aug. 2002</u>	Priority Not Claimed
(Number)	(Country)	(Day/Month/Year)	

I hereby claim the benefit under Title 35, United States code, § 119(e) of any United States provisional application(s) listed below.

_____	_____
(Application No.)	(Filing Date)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulation, § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

(Application No.)

(Filing Date)

(Status) (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statement and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statement may jeopardize the validity of the application of any patent issued thereon.

Power of Attorney: As a named inventor, I hereby appoint the following attorney(s) and/or agents) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: (list name and registration Number)

Customer No. 24106

John S. Egbert; 30,627

Andrew W. Chu; 46,625

Send Correspondence to:

Harrison & Egbert

412 Main Street, 7th Floor

Houston, Texas 77002 USA

Direct Telephone Calls to: (name and telephone number)

John S. Egbert; 713-224-8080

Full Name of Sole or First Inventor: Jiri VANEK

Inventor's Signature

Date

2. 4. 2004

Residence:

Prague, Czech Republic

Citizenship:

CZ- Czech Republic

Post Office Address:

Mazurská 522,

161 00 Prague

CZECH REPUBLIC

Full Name of _____ Inventor:

Inventor's Signature

Date

Residence:

Citizenship:

Post Office Address:

Full Name of _____ Inventor:

Inventor's Signature

Date

Residence:

Citizenship:

Post Office Address: